

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

WALTER M. DICKIE, M.D., Director

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1939
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Weekly Bulletin



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GUY P. JONES
EDITOR

REPORT INFLUENZA OUTBREAKS BY WIRE

The California State Department of Public Health has established a special research laboratory in Berkeley, where studies are now being undertaken in respiratory diseases, including influenza. For that reason, it is of importance that every epidemic of influenza or other respiratory disease be reported by telephone or telegraph. Health officers are requested to provide this special reporting service (with charges reversed), in order that throat washings and blood specimens may be obtained at once. The success of this research into influenza and similar respiratory diseases depends entirely upon the prompt reporting of outbreaks. This applies only to groups of cases. Individual cases should be reported on regular forms, as usual.

These special reports should be sent by telephone or telegraph to:

DR. M. D. EATON,
Research Laboratory,
1392 University Avenue,
Berkeley, California.
Telephone: Thornwall 6286

Sharpening the Focus in Health Education*

W. P. SHEPARD, M.D., M.A., San Francisco, California

INTRODUCTION

When a teacher asks a health officer what to do about teaching health in school, he should reply, "This is the way I wish the citizens of the community *thought* and *acted* regarding their health." He gives the teacher the *thoughts* and *acts* which will meet the health needs of the community, with which he is thoroughly familiar. The teacher may then apply her special skills in teaching these thoughts and acts to the coming generation.

This is a powerful alliance. Its success will revolutionize the health of the nation. It will simplify and lighten the health officer's problems. It is an alliance much needed by the health officer. It is so encouraging to find that teachers may become his allies that he must leave nothing undone to cultivate this relationship. His has been an almost single-handed struggle against discouraging odds. At times, only his faith in the cause of good health and his vision of the immeasurable benefits to be gained by the people through health improvement, have kept him in the fray. He is weary and battle-scarred. Powerful allies will renew his courage and bring closer to realization, his goal—a people free of preventable illness and defect.

WHAT THE HEALTH OFFICER WISHES

What the health officer wishes his people to think and do about their health can be outlined rather simply and briefly. It is available in most of the medical texts on hygiene. Different health officers might wish to vary the emphasis in their statement, or to indicate precedence of some items over others because of local conditions. But pretty generally, throughout the country, what they want the people to think and do about their health is the following:

I. UNDER PERSONAL HYGIENE

A. To develop in each person habitual recourse to:

1. Competent, prompt medical advice and care for:
 - (a) Illness, manifest or suspected;
 - (b) Periodic health examination, the period being more frequent in:
 - i Pregnancy

- ii Childhood
- iii Adolescence
- iv Late middle age
- v Times of unusual stress

2. All valuable artificial immunization procedures, such as:

- Smallpox
- Diphtheria
- Typhoid fever, when necessary
- Rabies, when necessary
- Others, if and as developed and proved valuable

B. To develop:

1. Desirable Health Habits, such as:
 - Adequate, balanced diet
 - Proper elimination
 - Proper balance of rest, exercise, play
 - Personal cleanliness
 - Wholesome mental attitudes
2. Ability to discriminate between good and poor health advice.

II. UNDER COMMUNITY HYGIENE

A. To develop in each person comprehension and appreciation of at least the fundamentals of:

1. Environmental Sanitation
 - (a) Water
 - (b) Foods
 - (c) Milk
 - (d) Waste disposal
2. Environmental Safety
 - (a) Safe roads, streets, homes, schools, and playgrounds
 - (b) Safe working and living conditions
 - i Light, ventilation, temperature
 - ii Freedom from hazards, harmful dusts, fumes, gases
3. Contagious Disease Control
 - (a) Finding and isolating the case or carrier
 - (b) Finding and isolating the contact
 - (c) Control of animal and parasite reservoirs in certain regions, such as:
 - i Rats and other rodents
 - ii Mosquito, louse, tick, fly, etc.

* Presented at General Session, American Association for Health, Physical Education and Recreation, San Francisco, California.

iii Animal-borne diseases, such as trichinosis, rabies.

4. Adequate Health Facilities

- (a) Health Departments
- (b) Competent Medical Care
- (c) Hospital, sanatoria, clinics

This is not as formidable a task as it may seem. Any health officer will elaborate and explain it for you and tell you precisely which items are of primary importance in your locality. Meanwhile, let us proceed to see why these acts and thoughts on the part of the public are desirable; what you will have accomplished if you can help us bring them about; and one of the possible ways in which you and we together may hasten our progress towards the goal.

WHY HE WISHES IT

These thoughts and acts are desirable because their lack today imposes an enormous burden upon our nation. We are justly proud of the progress already made towards longer and healthier lives. Few nations have ever made better progress against the adversities of nature, including health hazards, than we. That progress is already written large in the pages of our history. And teachers have made a signal contribution towards it. But our purpose here is to examine our present status and choose the direction of at least the next few steps. We must admit that the burden of ill health today is one of our most serious national problems.

To summarize the findings of the Technical Committee on Medical Care of the President's Interdepartmental Committee to Coordinate Health and Welfare Activities.

1. There are in the U. S. 70 million sick yearly, losing one billion days from their ordinary pursuits. Much of this is preventable.
2. Six out of every 1,000 children are crippled by birth injury, accident, infantile paralysis, tuberculosis, rheumatism, or congenital deformities.
3. There are 1½ million new cases of syphilis and gonorrhea yearly.
4. There are 1½ million mentally defective in the U. S.
5. There are 518,000 deaths from disease of the heart, kidney, blood vessels yearly.
6. There are over 150,000 deaths connected with childbirth each year.
7. There are 143,000 deaths from cancer yearly.
8. There are 95,000 deaths from pneumonia yearly.
9. There are 40,000 deaths from tuberculosis yearly.

10. There are 15,000 child deaths from contagious diseases yearly.

11. There has been but slow progress in research to control colds, influenza, infantile paralysis, cancer, mental diseases, rheumatism, degenerative diseases.

12. There has been little or no increase in life expectancy of persons in middle and advanced age.

13. There is general lack of adequate financial support and efficient organization of official health departments, notably State and local.

Here are 13 reasons why we need your help. There are others, but these indicate the extent of this national burden. They will not all be eliminated by teaching our people to act and think right. There are many other related factors, to be sure. But many of these deaths and illnesses can be eliminated. Education is our most effective implement. Health education in the schools is your contribution.

LET THE EDUCATORS TEACH

To the health officer you all look alike, health educators, physical educators, recreation directors, all are teachers. We are especially pleased that you are united in this organization in the interests of health. When the task before us is so urgent, when human lives and health and happiness are at stake, we can not comprehend delay due to disagreement as to who is to do the work. It is a challenge worthy of the finest mettle of us all. It is a field in which we are crying for more help. There is room for all and the better physical educators, recreation directors, and health educators you are, and the better health officers we are, the faster we shall make progress. We bespeak your united assistance. Let us off with our cloak of professional austerity, up with our immaculate, specialist sleeves, and lay to this job for the sake of our children and our children's children. Let us sharpen the focus in health education!

ONE REASON FOR SLOW PROGRESS

If we are to become your coworkers, perhaps one health officer may, as one colleague to another, offer an observation as to one of the reasons for our delayed progress together.

The health officer is concerned with the health of all the people, and particularly with the health of children. He is legally charged with prevention of contagious diseases, a majority of which occur in childhood. So we are both vitally interested in the child; you in the whole child; the health officer in children as a whole.

(Continued in next issue.)

MORBIDITY

Complete Reports for Following Diseases for Week Ending
November 18, 1939

Chickenpox

369 cases: Alameda County 13, Albany 10, Berkeley 4, Oakland 6, Piedmont 3, Contra Costa County 1, Fresno County 2, Fresno 15, Imperial 1, Inyo County 1, Bishop 16, Kern County 6, Kings County 6, Hanford 1, Los Angeles County 24, Burbank 2, Compton 5, Culver City 1, Long Beach 5, Los Angeles 16, Manhattan Beach 1, Santa Monica 1, Whittier 1, Monterey Park 1, Madera County 1, Chowchilla 1, Marin County 2, Merced County 1, Mono County 1, Monterey County 10, Monterey 9, Orange County 14, Huntington Beach 2, Orange 2, Santa Ana 4, Riverside County 5, Riverside 8, Indio 6, Sacramento 5, San Bernardino County 3, San Bernardino 1, San Diego County 2, Oceanside 2, San Diego 4, San Francisco 22, San Joaquin County 8, Stockton 35, San Luis Obispo County 8, Redwood City 4, Menlo Park 1, Santa Barbara 4, Santa Clara County 5, Palo Alto 1, San Jose 6, Santa Cruz 3, Sonoma County 1, Stanislaus County 3, Modesto 1, Sutter County 3, Red Bluff 1, Tulare County 30, Ventura County 2, Santa Paula 2, Yolo County 2, Winters 1, Yuba County 1.

Diphtheria

36 cases: Oakland 1, Butte County 1, Oroville 1, Contra Costa County 1, Los Angeles County 6, Los Angeles 1, Ukiah 1, Calistoga 1, Orange County 2, Elsinore 6, San Bernardino County 2, San Diego County 1, San Diego 1, San Francisco 4, Stockton 1, San Luis Obispo County 1, Lompoc 1, San Jose 1, Tulare County 1, Tulare 1, Ventura County 1.

German Measles

18 cases: Berkeley 1, Glendale 1, Long Beach 1, Los Angeles 1, South Pasadena 2, Mill Valley 1, Monterey County 2, Anaheim 1, Seal Beach 1, Ontario 1, San Diego County 1, San Diego 4, Santa Barbara 1.

Influenza

21 cases: Los Angeles County 3, Long Beach 1, Los Angeles 13, Gardena 1, Santa Ana 1, Riverside 1, Sonoma County 1.

Malaria

4 cases: Kern County 1, Sacramento 1, Yuba County 1, California 1.*

Measles

165 cases: Oakland 3, Fresno County 1, Imperial County 1, Holtville 2, Los Angeles County 2, Burbank 2, Los Angeles 8, San Fernando 5, South Gate 2, Merced County 1, Pacific Grove 1, Orange County 1, Anaheim 1, Riverside County 1, San Diego County 1, National City 29, San Diego 65, San Francisco 1, San Joaquin County 1, Santa Barbara County 1, Fort Jones 19, Tulare County 16, Yuba County 1.

Mumps

170 cases: Alameda County 4, Alameda 2, Albany 2, Berkeley 3, Oakland 9, Gridley 9, Fresno 2, Selma 1, Kern County 9, Bakersfield 10, Kings County 2, Los Angeles County 4, Burbank 1, Huntington Park 1, Long Beach 3, Los Angeles 20, Manhattan 1, Montebello 4, Pomona 1, South Pasadena 1, Pacific Grove 1, Orange County 11, Anaheim 6, Sacramento 1, San Bernardino County 1, San Diego 1, San Francisco 17, Stockton 3, San Mateo County 1, Daly City 2, San Mateo 1, Santa Barbara 11, Santa Maria 1, Gilroy 1, Mountain View 1, Palo Alto 14, San Jose 3, Stanislaus County 1, Sutter County 1, Ventura County 1, Oxnard 1, Yolo County 1.

Pneumonia (Lobar)

42 cases: Berkeley 1, Oakland 1, Fresno 2, El Centro 1, Los Angeles County 7, Burbank 1, Glendale 1, Long Beach 2, Los Angeles 17, Manhattan 1, Redondo 1, Madera County 1, San Diego County 1, San Francisco 2, Shasta County 1, Santa Rosa 1, Oxnard 1.

Scarlet Fever

187 cases: Alameda County 2, Oakland 4, Butte County 2, Pittsburg 1, Coalinga 1, Fresno 1, Imperial 2, Kern County 4, Kings County 2, Hanford 5, Los Angeles County 29, Compton 2, Culver City 1, Glendale 4, Huntington Park 2, Long Beach 1, Los Angeles 45, Pasadena 2, Whittier 1, South Gate 1, Monterey Park 2, Madera 1, Merced County 2, Huntington Beach 2, Santa Ana 1, Riverside County 1, Sacramento 2, San Bernardino County 1, San Bernardino 1, San Diego County 3, El Cajon 2, National City 1, San Diego 5, San Francisco 8, San Joaquin County 10, Stockton 4, Redwood City 1, Santa Clara County 5, San Jose 3, Sonoma County 2, Stanislaus County 4, Turlock 1, Tehama County 1, Trinity County 2, Tulare County 4, Lindsay 1, Ventura County 1, Santa Paula 2, Ventura 2.

Smallpox

One case: Kern County.

Typhoid Fever

17 cases: Berkeley 1, Fresno County 2, Los Angeles County 3, Los Angeles 4, Pasadena 2, Merced County 1, San Bernardino County 1, Stanislaus County 1, Yuba County 1, California 1.*

Whooping Cough

118 cases: Alameda County 3, Berkeley 1, Fresno County 3, Fresno 2, Kern County 6, Bakersfield 1, Los Angeles County 14, Burbank 1, Long Beach 2, Los Angeles 14, Santa Monica 1, Napa County 3, Fullerton 3, Hemet 1, San Jacinto 1, Indio 1, San Diego County 1, San Francisco 17, Redwood City 2, San Bruno 2, Lompoc 1, Santa Barbara 8, Santa Clara County 1, Palo Alto 6, San Jose 12, Santa Cruz 1, Sonoma County 3, Santa Rosa 1, Tulare County 5, Porterville 1.

Anthrax

One case: San Luis Obispo County.

Meningitis (Epidemic)

3 cases: Glendale 1, San Francisco 1, Stanislaus County 1.

Dysentery (Amoebic)

12 cases: Fresno County 2, Long Beach 1, Los Angeles 1, Atwater 1, San Bernardino County 1, Ontario 3, Burlingame 1, Daly City 1, Petaluma 1.

Dysentery (Bacillary)

237 cases: Los Angeles 9, San Fernando 1, San Francisco 2, Shasta County 213, Redding 8, Sonoma County 2, Tulare County 2.

Pellagra

One case: Los Angeles County.

Poliomyelitis

21 cases: Oakland 4, Colusa County 1, Contra Costa County 1, Fresno County 1, Kern County 4, Los Angeles 2, Long Beach 1, Madera County 1, Monterey County 1, Laguna Beach 1, Sacramento 1, San Bernardino 2, San Diego 1, San Francisco 2, San Joaquin County 1, Mountain View 1, Watsonville 1, Sutter County 1.

Tetanus

2 cases: Pasadena 1, Ontario 1.

Trachoma

16 cases: Butte County 3, Fresno County 1, Calexico 1, El Centro 1, Kern County 7, Orange 1, San Francisco 1, California 1.*

Encephalitis (Epidemic)

2 cases: Alameda 1, Tulare County 1.

Paratyphoid Fever

One case: San Francisco.

Trichinosis

One case: Berkeley.

Typhus Fever

2 cases: Los Angeles.

Jaundice (Epidemic)

2 cases: Sonoma County.

Food Poisoning

8 cases: San Francisco.

Undulant Fever

7 cases: Beverly Hills 1, Pasadena 1, Lynwood 1, Pacific Grove 1, Sebastopol 1, Stanislaus County 1, Tulare County 1.

Coccidioidal Granuloma

5 cases: Kern County 2, Bakersfield 2, Delano 1.

Septic Sore Throat

4 cases: Berkeley 1, Oroville 1, Salinas 1, Santa Ana 1.

Relapsing Fever

One case: San Bernardino County.

Rabies (Animal)

7 cases: Fresno 1, Calexico 1, Los Angeles 2, San Francisco 2, Lodi 1.

* Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

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